



U.S. Immigration  
and Customs  
Enforcement

## ICE Supplementary Guidance to the DHS COVID-19 Guidance for Component Leadership, Medical Officers, and Supervisors of April 1, 2020

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The purpose of this guidance is to expand upon the DHS COVID-19 Guidance for Component Agency Leadership, Medical Officers, and Supervisors, dated April 1, 2020 (DHS COVID-19 Guidance). The DHS COVID-19 Guidance is intended for the day when operations must continue as normal, and testing is readily available. The DHS guidance states that it is a “minimum guideline expected to be tailored as needed by Operational Components....” Therefore, Component Agencies may do more, but should not take less stringent measures than those outlined in the DHS COVID-19 Guidance.

In an abundance of caution, until testing is widely and consistently available, and in order to help slow and stop the spread of COVID-19, ICE Supervisors and Field Responsible Officials shall implement the following supplementary guidance as it pertains to mission essential employees that must report on-site to work:

- Prior to leaving for work, employees must take their temperature, and it must be lower than 100.4°F (38°C) without fever-reducing medication (if taking temperature orally, do not drink anything for 30 minutes prior to taking your temperature), and ensure they are asymptomatic.
- The use of personal protective equipment (PPE) is encouraged for any activities where a potential exposure<sup>1</sup> is possible. If an employee believes that he/she may have been exposed to COVID-19, the following steps should be considered:
  - If an employee was **not** wearing PPE at the time of potential exposure, **the employee** should be placed on a 14-day self-quarantine beginning the day after their last exposure to the person with a presumptive or laboratory-confirmed case of COVID-19 regardless of whether that employee exhibits the known symptoms of COVID-19.
  - If an employee **was** wearing PPE at the time of potential exposure, the supervisor should consult with the Occupational Safety and Health Unit regarding whether the risk of potential exposure is great enough that the employee should be placed on a 14-day self-quarantine.

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<sup>1</sup> “Exposure” is defined as being within six feet of a person with a presumptive or laboratory-confirmed case of COVID-19 for longer than five minutes, or by the sharing of contact surfaces such as desks, tables, door handles, and other contact surfaces.



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- At this time, testing for COVID-19 is handled on a case-by-case, location-dependent basis by city, county, and state health officials. Until testing becomes widespread and easily available in all localities across the country, presumptive cases of COVID-19 are to be treated the same as laboratory-confirmed cases of COVID-19. A presumptive diagnosis is made by a medical professional, based on symptoms exhibited by an individual.
  - **If testing is not available**, an employee with a presumptive or laboratory-confirmed case of COVID-19 may return to work **after consulting with their supervisor** when **all** of the following criteria are met:
    - 72 hours after the last occurrence of a fever over 100.4 degrees Fahrenheit without fever reducing medication;
    - 7 days after the onset of symptoms; and
    - The symptoms experienced by the employee have improved.
  - **If testing is available**, employees with a presumptive or laboratory-confirmed case of COVID-19 may return to work after consulting with their supervisor when **all** of the following criteria are met:
    - No fever over 100.4 degrees Fahrenheit without fever reducing medication;
    - Symptoms experienced by the person have improved; and
    - Two (2) negative COVID-19 tests in a row, performed 24 hours apart.
- In all cases, **follow the guidance of your healthcare provider and local health department**. The decision to stop home isolation should be made in consultation with your healthcare provider and state and local health departments. Local decisions depend on local circumstances.

This supplementary guidance is based on recommendations promulgated by the Centers for Disease Control and Prevention and reflects current medical knowledge about COVID-19. As such, it may change as the recommended posture for the country changes. If you have questions or concerns about how to implement this guidance within your AOR, please contact Elizabeth Kennett, Division Chief of Safety and Sustainability, at 202.732.6649 or [elizabeth.l.kennett@ice.dhs.gov](mailto:elizabeth.l.kennett@ice.dhs.gov).